pulses through National Agricultural Cooperative Marketing Federation of India Ltd. and other agencies. Besides, Government is also monitoring prices of pulses on a regular basis.

Survey on health, nutrition and behaviour

*275. SHRI JANARDHANA POOJARY: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether National Family Health survey was conducted to gather information on health, nutrition and behaviour;

(b) if so, the details thereof;

(c) whether it is a fact that the findings of the survey indicates that the indices on health and development are not encouraging;

(d) if so, the details thereof, with the details of funds generated from various sources, allocated and spent during the last five years on health particularly in respect of women and children in rural areas, year-wise and State-wise; and

(e) what measures Government propose to initiate to improve the situation and the time-frame, if any, set for the purpose?

THE MINISTER OF HEALTH AND FAMILY WELFARE (DR. ANBUMANI RAMDOSS): (a) to (c) Yes, Sir. The National Family Health Survey-Ill (NFHS-III) has been conducted in the year 2005-06. The survey has collected information on Mortality, marriage & Fertility, Family Planning, Maternal and Child Health, Immunization of children, Treatment seeking behaviour for childhood diseases like diarrhoea & acute respiratory infection, child feeding practices, Nutritional status of children and adults, prevalence of anemia among children and adults, obesity among men & women, Knowledge attitude and behaviour with regards to of HIV/AlDS and its prevalence, women's empowerment, use of iodated salt, family life education, prevalence and treatment seeking behaviour for TB & Malaria. The survey has covered samples from all ever married, unmarried and widowed women in the age group 15-49 and men in the age group of 15-54.

Some of the key findings of the survey paint a mixed picture of India's health. On the one hand, institutional delivery and maternity care has improved, unmet need for family planning has reduced, women are having fewer children, infant mortality has dropped; overall immunization coverage of children has improved and knowledge about HIV/AIDS has improved in the seven-year period since the last NFHS survey (1998-99). On the other hand, anaemia and malnutrition are still widespread among children and adults. And, in an odd juxtaposition, more adults, especially urban women, are overweight or obese.

(d) and (e) With a view to promote maternal and child health, the Government implemented the Reproductive and Child Health progrmme, Phase-I (RCH-I) for a period of five years, since 1997-98. The programme has been extended further for another period of five years, beginning in 2004-05. Later, RCH programme has been integrated under the National Rural Health Mission (NRHM), launched in April, 2005. The national Rural Health Mission seeks to provide accessible, affordable and quality health care to the rural population, especially the vulnerable section. It also seeks to reduce maternal mortality ratio from the current level of 301 (as per Registrar General of India's SRS Report 2001-03) to 100 per 100,000 live births and infant mortality from current level of 58 (as per Registrar General of India's SRS Report 2005) to 30 per 1000 live births and the Total fertility level from 2.9 (as per Registrar General of India's SRS Report 2005) to 2.1 within the seven year period of the Mission, ending in 2012. NRHM has pro-poor focus and integrates all the stand-alone programmes into a single composite Programme.

Funding support for the various interventions being undertaken towards women and child health has been from domestic budgetary support as well as from the externally aided components. The state-wise details of funds released and expended during the last five years is given in the enclosed statement.